PTO/SB/06 (07-06)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/586,200			ing Date 14/2006	To be Mailed
	Al	AS FILE	SMALL	ENTITY \square	OR		HER THAN				
⊢	FOR		NUMBER FILED		(Column 2) NUMBER EXTRA		RATE (\$)	FEE (\$)	- CK	RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1.16(a), (b),	\neg	N/A	LD NO	N/A	ı	N/A	TEE (a)	١	N/A	TEE (0)
	SEARCH FEE		N/A		N/A	ı	N/A		1	N/A	
듬	(37 CFR 1.16(k), (i), (EXAMINATION FE	E	N/A		N/A		N/A		ı	N/A	
	(37 CFR 1.16(a), (p), FAL CLAIMS	or (q))	minus 20 = *				x \$ =		OR	x s =	
IND	CFR 1.16(i)) EPENDENT CLAIM CFR 1.16(h))	s	minus 3 = *			ı	x s =			x s =	
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addit 35 U	If the specification and drawing sheets of paper, the application is \$250 (\$125 for small entity) additional 50 sheets or fraction 35 U.S.C. 41(a)(1)(G) and 37 (n size fee due for each n thereof. See						
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))											
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL	L	ı	TOTAL	
APPLICATION AS AMENDED – PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY											
AMENDMENT	10/29/2010	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.18())	• 21	Minus	·· 22	= 0		x \$ =		OR	X \$52=	0
z	Independent (37 CFR 1.16(h))	• 1	Minus	3	= 0	l	x \$ =		OR	X \$220=	0
Ĭ	Application Size Fee (37 CFR 1.16(s))										
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0
(Column 1) (Column 2) (Column 3)											
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.160))		Minus			1	x \$ =		OR	x s =	
Ž	Independent (37 CFR 1.16(b))		Minus	***		1	x \$ =		OR	x s =	
蕌	Application Size Fee (37 CFR 1.16(s))					l			l		
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					1			OR		
	•								OR	TOTAL ADD'L FEE	
If the entry in column 1 is less than the entry in column 2, write 0" in column 3. Legal Instrument Examiner: "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter" 20". "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "2". "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For IN THIS SPACE is less than 5, enter "3".											

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